



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Michel REVEL et al.

Application No.: 09/980,823

Filed: August 28, 2002

For: IL6RIL6 CHIMERA FOR THE TREATMENT OF NEURODEGENERATIVE DISEASES

Conf. No. 1533

Art Unit: 1647

Examiner: F. Hamud

Washington, D.C.

Atty.'s Docket: REVEL=16

Date: February 22, 2005

Customer Service Window, Mail Stop AF  
Honorable Commissioner for Patents  
U.S. Patent and Trademark Office  
Randolph Building, 401 Dulany Street  
Alexandria, Virginia 22314

RESPONSE UNDER 37 CFR 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 1647

Sir:

Transmitted herewith is a [X] Amendment [ ]

in the above-identified application.

[ ] Small Entity Status: Applicant(s) claim small entity status. See 37 C.F.R. §1.27.

[ ] No additional fee is required.

[XX] The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA EQUALS
TOTAL	* 6	MINUS	** 20	0
INDEP.	* 2	MINUS	*** 3	0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

ADDITIONAL FEE TOTAL

SMALL ENTITY	
RATE	ADDITIONAL FEE
x 9	\$
x 43	\$
+ 145	\$
ADDITIONAL FEE TOTAL	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
x 18	\$
x 86	\$
+ 290	\$
TOTAL	

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
\*\* If the "Highest Number Previously Paid for" IN THIS SPACE is less than 20, write "20" in this space.  
\*\*\* If the "Highest Number Previously Paid for" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment of the number of claims originally filed.

[XX] Conditional Petition for Extension of Time

If any extension of time for a response is required, applicant requests that this be considered a petition therefor.

[XX] It is hereby petitioned for an extension of time in accordance with 37 CFR 1.136(a). The appropriate fee required by 37 CFR 1.17 is calculated as shown below:

## Small Entity

## Response Filed Within

- [ ] First - \$ 60.00  
[ ] Second - \$ 225.00  
[ ] Third - \$ 510.00  
[ ] Fourth - \$ 795.00

## Month After Time Period Set

[ ] Less fees (\$ ) already paid for month(s) extension of time on

## Other Than Small Entity

## Response Filed Within

- [XX] First - \$ 120.00  
[ ] Second - \$ 450.00  
[ ] Third - \$ 1020.00  
[ ] Fourth - \$ 1590.00

## Month After Time Period Set

02/23/2005 SDENB02 00000147 09900023

01 FC:1251

120.00 OP

[ ] Please charge my Deposit Account No. 02-4035 in the amount of \$

[XX] Credit Card Payment Form, PTO-2038, is attached, authorizing payment in the amount of \$120.00.

[ ] A check in the amount of \$ is attached (check no. ).

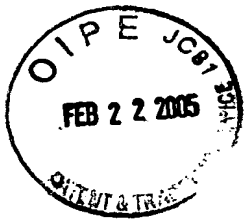
[XX] The Commissioner is hereby authorized and requested to charge any additional fees which may be required in connection with this application or credit any overpayment to Deposit Account No. 02-4035. This authorization and request is not limited to payment of all fees associated with this communication, including any Extension of Time fee, not covered by check or specific authorization, but is also intended to include all fees for the presentation of extra claims under 37 CFR §1.16 and all patent processing fees under 37 CFR §1.17 throughout the prosecution of the case. This blanket authorization does not include patent issue fees under 37 CFR §1.18.

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TREATMENT OF NEURO-	)	
DEGENERATIVE DISEASES	)	

**AMENDMENT**

Customer Service Window, Mail Stop AF  
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Randolph Building  
401 Dulany Street  
Alexandria, Virginia 22314

Sir:

In response to the final Office Action of October 20, 2004, petition for a one-month extension of time and payment being attached hereto, please amend as follows:

**Amendments to the Claims** are reflected in the listing of claims that begins on page 2 of this paper.

**Remarks/Arguments** begin on page 4 of this paper.